

REGION VI AGING SERVICES

Russ Sunderland, Regional Aging Services Program Administrator

Serving Barnes, Dickey, Foster, Griggs, LaMoure, Logan, McIntosh, Stutsman and Wells Counties



Winter 2007



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AGING SERVICES NEWSLETTER

Please share this newsletter with a friend, co-worker, at your Senior Center, post on a bulletin board, etc. If you wish not to be on the mailing list for the newsletter, please contact **Russ Sunderland** at **253-6344**. You are welcome to submit any news you may have regarding services and activities that are of interest to seniors in this region. **South Central Human Service Center** makes available all services and assistance without regard to race, color, national origin, religion, age, sex, or handicap, and is subject to Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1975 as amended. **South Central Human Service Center** is an equal opportunity employer.

MISSION STATEMENT

In a leadership role, Aging Services will actively advocate for individual life choices and develop quality services in response to the needs of vulnerable adults, persons with physical disabilities, and an aging society in North Dakota.





*My Health.
My Medicare.*

Centers for Medicare & Medicaid Services National Medicare Multi-Media & Education Campaign

Start Saving on Your Prescription Drugs

Are you having trouble paying for prescription drugs? If you are and you have Medicare, there is extra help available and you may be eligible. And, if you think you won't qualify for it, think again.

One woman with Medicare was struggling to pay for her prescriptions even with a drug plan and her \$800 Social Security benefit. She talked to Monica, a counselor at the local State Health Insurance Information Program (SHIP) in Louisiana. Once she heard that the value of her house, as long as she lived in it, would not be used when determining her qualification for the extra help, she applied and qualified. She was very grateful for the extra help.

This extra help — available by applying and qualifying through Social Security — can pay for part of your drug costs, for example monthly premiums, annual deductibles, and prescription co-payments. The extra help could be worth more than \$3,300 per year. Many people with limited income and resources qualify for these big savings and they don't even know it. So, be a smart consumer, and don't walk away from this extra help.

You must apply to find out if you qualify for the extra help.

Apply online at: www.socialsecurity.gov. Call Social Security at 1-800-772-1213 (TTY 1-800-325-0778), or go to the nearest Social Security office for assistance.

To qualify for extra help in 2007, your income should be no more than \$15,315 for an individual or \$20,535 for a married couple. Your income limit may be higher if you or your spouse support other family members who live with you or if you live in Alaska or Hawaii. Your resources (like bank accounts, stocks and bonds) can't be more than \$11,710 for an individual or \$23,410 for a married couple. Remember, your house and car don't count toward resources.

To learn more about the Medicare prescription drug plans and when you can join, call 1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048) or visit www.medicare.gov. Get the most out of your Medicare benefits!

This information prepared by the U.S. Department of Health and Human Services.



REMINDER

WHO: Adults Age 50 and Older (even if healthy). **AND** – Children age 6 months through 4 years. The flu shot is recommended for all North Dakotans age 65 and older, regardless of their health status.

WHAT: FLU SHOT

WHEN: October or November is the best time to get the flu shot, but you can still get vaccinated in December and throughout the flu season. In North Dakota, the flu season can start in October and last as late as May. **It is NEVER too late to get the flu shot!**

WHERE: Check with your doctor, local public health unit or pharmacist.

There are also immunizations for pneumonia and shingles. The vaccine for shingles is only available for persons age 60 and over.

Stop Prescription Drug Scams:

Protect Your Personal Information and Report Complaints

Con artists and fake companies are taking advantage of the new Medicare prescription drug benefit to steal your information and money **or worse...**

How Do They Do It?

- Call and offer to sign you up for a \$299 prescription drug plan (or similar amount)
- Use emails and the internet to offer to help you find free or low-cost prescription drug programs for a fee— often asking **\$195** or as little as **\$5** for each prescription
- Pretend they are from Medicare, Social Security or the American Medical Association
- Ask you to sell your prescription drugs or use your Medicare benefit to buy someone else's drugs
- Offer bribes to pharmacies, doctors or other health care people to get them to change your prescription or prescribe drugs you don't need
- Prescription "shorting"— the pharmacy gives you 1 or 2 fewer pills

Know the Facts:

- The Social Security Administration and Medicare do **not call or visit**
- No one can come into your home uninvited
- Medicare Prescription Drug Plans are not allowed to ask for your bank account, Medicare number, credit card or other personal information over the phone
- Information on free and low-cost prescription drug programs is available **at no charge**. Ask your pharmacist, physician, or local senior agency for information or check out websites like www.pparx.org or www.benefitscheckup.org

To Avoid These Scams, Take the Following Steps:

- Hang up the phone immediately. It's shrewd to be rude!
- Call 911 if you feel threatened
- Never give any personal information, such as Medicare, Social Security, bank account or credit card numbers to anyone who calls on the phone or comes to the door
- Sign up for the National Do Not Call Registry at 1-888-382-1222 or www.donotcall.gov
- Count your pills before you leave the pharmacy or when you receive them in the mail
- Call ND Senior Medicare Patrol (SMP) at 1-800-233-1737 to report or discuss possible fraud or scams
- Call Medicare at 1-800-MEDICARE (1-800-633-4227) with Medicare questions or concerns

Report Anyone Attempting to Steal Your Money or Personal Information or Selling Fake Prescription Plans, Call:

- Your local police department
- **ND SMP 1-800-233-1737**
- 1-877-7SAFERX (1-877-772-3379) **OR** 1-800-HHS-TIPS (1-800-447-8477)

PROPERTY TAX RELIEF-INCOME TAX CREDIT

by Cory Fong, Tax Commissioner



During the last biennium (2005-2007), the North Dakota economy was strong, enabling the State to offer \$115 million in property tax relief. The relief is the result of a law passed by the 2007 Legislature and signed by Governor Hoeven. The relief is provided to homeowners, land owners, and commercial property owners.

As with any new program, especially when it involves a tax credit, people have been asking questions. This article presents some of the more common questions people may have about the program and our answers.

How do I receive the property tax relief?

The method of providing the property tax relief is an income tax credit based on the property taxes that you paid for residential property, agricultural property, and commercial property.

There are two property tax credits:

1. One for residential and agricultural property.
2. One for commercial property.

It is possible to qualify for both credits. The credits are claimed on the 2007 and 2008 North Dakota income tax returns.

How much is the residential/agricultural property tax credit?

On your 2007 income tax return, a credit equal to 10 percent of the residential and agricultural property taxes shown on your **2006** real estate tax statement (or 2007 mobile home tax statement) is allowed. The amount of the credit is based on the residential/agricultural property you own that is located in North Dakota. The amount of the credit is based on the property tax paid before any discount. Special assessments are not included when calculating the credit. The maximum credit allowed, based on your filing status, is:

\$500.....if single, head of household, qualifying widow(er), or married filing separately; or
\$1,000...if you are married filing jointly.

On your 2008 income tax return, the credit is calculated in the same way as for 2007, using the residential/agricultural property taxes shown on your **2007** real estate tax statement (or 2008 mobile home tax statement). **Important Note:** The combined amount of the residential and agricultural property tax relief may not exceed the \$500 and \$1,000 maximum credit amounts based on your filing status.

How much is the commercial property tax credit?

The commercial property tax credit is calculated in the same way as the residential and agricultural property tax credit, except that it is based on your commercial property located in North Dakota. The maximum credit allowed is \$500 per return (or \$1,000 per return, if married filing jointly). This credit is allowed in addition to the residential and agricultural property tax credits.

Who qualifies for the property tax relief?

To qualify for property tax relief you must meet the following conditions:

For **residential/agricultural** credit:

1. Your primary home is located in North Dakota; and
2. You own residential and/or agricultural property located in North Dakota.

To qualify for **commercial** credit:

1. You must have a requirement to file a North Dakota income tax return; and
2. You own commercial property located in North Dakota.

I rent my home and I own property that is subject to property tax. Am I eligible for an income tax credit?

Yes, renters who own property are eligible for relief if:

1. Your rented home is your primary home and it is located in North Dakota.
2. The property subject to property tax must be residential or agricultural property located in North Dakota.

I own a mobile home. Are mobile home taxes eligible for the income tax credits?

Yes. The 2007 and 2008 mobile home taxes are eligible for the property tax relief if the mobile home is located in North Dakota and is classified as residential property.

I own my home but I don't file state income tax. Am I eligible for residential property tax relief?

Yes. If you don't have to file an income tax return because your income is below the amount that requires you to file, you are eligible for property tax relief if:

1. Your primary home is located in North Dakota; and
2. You own residential property located in North Dakota.

By filing a special new form, Form ND-3, you can obtain your property tax relief in the form of a property tax relief certificate. You can redeem this certificate at your county treasurer's office. The amount of the relief is equal to the residential property tax credit (as described earlier).

Will I be getting a check from the State or from the County for my property tax relief?

You will not get a check from the State or the County for the **residential/agricultural** property tax relief. Instead, you will be allowed a credit on your State income tax return, which will reduce your income tax liability. A smaller income tax liability may mean a larger refund for you. Also, if your credit is more than your income tax liability in the first year, you may either

1. Claim the unused credit on your following year's tax return, or
2. Request to receive a property tax relief certificate for the amount of the unused credit, which you can redeem at your country treasurer's office.

If you are unable to use all of your **commercial property income tax credit** on your North Dakota income tax return, you may carry forward the unused credit and use it on your next year's North Dakota income tax return. If you are unable to use all of your unused credit on the next year's return, you may continue to carry forward the unused portion of the credit for an additional four years (for a total of 5 carryforward years).

More information about the Property Tax Relief - Income Tax Credit program is available on our web site at **www.nd.gov/tax/property/taxrelief**. If you have questions about the program, please contact the Tax Department at 701-328-2770 or by e-mail at **propertytaxrelief@nd.gov**.

Meet North Dakota's 2007 Outstanding Older Worker

**Richard "Rich" Ott, 74
Superintendent of Schools
Glen Ullin, ND**

Richard Ott's twinkling blue eyes, unparalleled exuberance and giving spirit truly are contagious. He carries these qualities through all he does. It's his mission to make the most of every moment life presents. Because of Rich, his community, state and workplace are better places.

Rich tried retirement but it simply didn't suit him. Within two days of retirement he knew he needed to get back into the workforce, and on the third day he was back at a new job as a lobbyist. And although he has "retired" from different positions, he always moves on to using his professional talents at another position. "I like retirement parties!" he quips.

With his career experiences steeped in education, Rich now shares that expertise as a full-time school superintendent at Glen Ullin, North Dakota. He commutes there from Bismarck (about 60 miles away), and helps that school system with the many challenges facing the small school districts of North Dakota. "Basically, I'm responsible for everything that happens and everything that fails to happen in the school operation. With declining enrollments, it is a major challenge to keep a valid, balanced program available for students and the community." This is Rich's fifth job he has taken since he first tried "retirement."

Rich loves bringing the public to that important point where they feel they have involvement in the school. He decided to go into this line of work because, "Human development is the most fascinating aspect of life. To be able to witness this and actually have a hand in it on a daily basis is very satisfying."

Community leaders in Glen Ullin offer this description of Rich: He has vast experience and has brought a sense of well-being and direction to the entire school community. He sets an example of calm efficiency and intelligent problem solving. Students, staff and the community have embraced him as a valued friend. The school board's evaluation of him was flawless.

Among his most recent past positions, he served as the Executive Director for the North Dakota School Boards Association and the director for the Humane Society. At one time or another he has been a member of numerous civic and professional organizations holding offices in most. He has also served on various boards and committees.



Throughout his life Rich immersed himself in other vocations and interests that give him perspectives helpful in relating to others. His first job was folding boxes for a J.C. Penney store. He says, "I learned the importance of punctuality, the satisfaction of productive work and the thrill of being paid for my effort." He also worked in restaurants, as a land surveyor, a draftsman and teacher.

"Continuing to work helps keep me mentally alert and physically conditioned," said Rich. "It's a reason to get up in the morning and to stay clean and presentable."

The key to his success, he said, is "A sense of pride in accomplishment and a willingness to go beyond 'clock hours' in the effort to accomplish personal and professional goals. It also is important to stay optimistic and happy!"

Health challenges confronted Rich through the years but he has battled back. For 16 years he has had an artificial aortic heart valve. He also survived cancer after radiation treatments and radioactive implants and is diabetic.

This spunky veteran served in the Army, both active duty and reserves. He has his bachelor's and master's degrees in education from the University of Missouri (Columbia) and his doctorate from St. Louis University (MO).

He is a longtime activist with the Central Dakota Humane Society and plays Santa each year for their **Santa Paws** fundraising program. Rich is the original Santa Paws and spends hours getting his photo taken (dressed as Santa Paws) with pets from throughout the area. He works on other fundraisers and activities for the Humane Society such as the **Shaggy Shuffle** (a dog walk) and **Bene-Pet** (an auction). He also works extensively as a volunteer for the North Dakota State Library. He reads to children at a local bookstore and is a life member of the Girl Scouts. He loves golf, reading, music, traveling and working with homeless animals. Rich is father to two daughters and has six grandchildren.



Rich's extraordinary spirit and engagement in life are only complemented by his wife Doris who is equally engaging and vivacious. She sums up her husband in words echoed by friends: curious, creative, original, intelligent and funny. Rich Ott is a man who truly leaves a positive mark on all he touches.

Source: *Experience Works*



Girls Rule!

According to the Alaska Department of Fish and Game, while both male and female reindeer grow antlers in the summer each year, male reindeer drop their antlers at the beginning of winter, usually late

November to mid-December. Female reindeer retain their antlers till after they give birth in the spring. Therefore, according to every historical rendition depicting Santa's reindeer, every single one of them, from Rudolph to Blitzen...had to be a girl. We should've known. Only women would be able to drag a fat man in a red velvet suit all around the world in one night, and not get lost.



CHANGE OF ADDRESS FOR AGING SERVICES DIVISION

The Aging Services Division of the North Dakota Department of Human Services has moved to Prairie Hills Plaza. The new address is as follows:

Aging Services Division
1237 West Divide Avenue, Suite 6
Bismarck, ND 58501

Telephone numbers have not changed. The new fax number is as follows:

Receptionist
701-328-4601

Fax Number
701-328-8744

North Dakota Aging and Disability
Resource-LINK
(Senior Info-Line)
1-800-451-8693



Home for the Holidays

Face the Facts: Topics to Discuss Now with Your Aging Parents

It is said that love is the greatest gift of all. As many families gather together during the holiday season, it may provide a good opportunity to express how much we care through a frank and open discussion with older relatives about their well-being. As we age and live longer, financial, legal, health care and long term care issues affect families, not just individuals.

The eldercare Locator, a nationwide service funded by the U.S. Administration on Aging that links older consumers and their families to local aging services, produced this guide to help families “face the facts” about these important topics. The overview below addresses some key areas of concern, suggested questions to ask, and ways in which families might initiate conversations about these often difficult to discuss topics with their aging parents.

Key Considerations:

1. Find out what financial benefits are provided by your parents’ Social Security and pension. Determine if they are eligible for other financial programs.
2. Be certain each family member has a living will. Know where all your parents’ insurance policies, wills, trust documents, tax returns, investment and banking records are located.
3. Understand that Medicare generally does not cover long term care (e.g. nursing home or extended home care), and Medicaid pays only for low-income individuals.
4. Investigate what type of long term care insurance coverage may be best for your parents or for yourself! Generally, premiums are lower when policies are purchased at younger ages.
5. Identify what community services are available that can help your parents maintain independence in the home for as long as possible – such as home modification programs that can install assistive devices (i.e., bathroom rails and entry ramps), and home health and chore assistance. Learn whether housing options are available to meet their changing needs.

Family members may not understand how their parents’ estate planning could impact their own financial status as well as that of their children.



CONVERSATION CHECKLIST

Families may avoid potential problems and be in a good position to deal with later life needs by understanding and being prepared to face the following issues.

Financial Organization

There are many financial resources that your loved one might already be receiving or be eligible for. Social Security is the federal program that provides retirees a regular income based on work history, and benefits to disabled workers. Long-time workers usually have pensions that are retirement compensation plans either fully managed by the employer, or involve employee contributions, such as Tax-Deferred Annuities (TDAs) or Individual Retirement Accounts (IRAs). Some people have "lost" a pension they earned, while others forget about a retirement account set up many years prior. Low-income and disabled individuals age 65 or older could also be eligible for monthly cash benefits through Supplemental Security Income (SSI).

Ask...

- What type of retirement income do you receive?
- Are pension savings from all jobs over the years being collected?
- Is there a need to apply for Supplemental Security Income benefits?
- Who can access your important financial information in case of emergency?
- Where do you keep these important documents?

Legal Preparation

Wills and power of attorney may not be topics your relatives want to discuss. However, these issues need to be addressed before it's too late to make sure that their assets are properly taken care of and that their medical treatment preferences are known. A will directs how a person wants property to be distributed after death and appoints a trusted person to be the executor; and a durable power of attorney provides written authorization for a person you name to act on your behalf for whatever financial or health care purpose you spell out. An advance directive is a legal document that provides directions for your health care if you are unable to speak for yourself.

Ask...

- Do you have a will?
- Have you executed a durable power of attorney or considered who you might want to handle your finances or health care decisions in the event that you are unable to do so?
- Are important legal documents up-to-date?
- Where are these important documents kept?
- What other legal matters are you concerned about?

For more information: contact the Eldercare Locator at 1-800-677-1116 Monday through Friday or through the Web site at 222.eldercare.gov.

Healthy Eating and Diabetes

A healthy diet and daily exercise are key to everyone's health and wellbeing. But for people with diabetes, following a careful meal plan is especially important, because doing so helps keep the disease under control. In fact, the way a person with diabetes eats is just as important as his or her medication when it comes to controlling blood sugar and avoiding diabetes complications, such as blindness and kidney disease.

If you want to find the meal plan that will help the most with your diabetes, talk to a Registered Dietitian. Your dietary needs depend on factors such your age, sex, weight, and activity level. A dietitian can consider those factors, find out which foods you like, and come up with a diet that is both healthy and appetizing. Once that's done, you'll want to check in with him or her periodically to see if any adjustments need to be made.

Despite what you may have heard, having diabetes does not mean you have to give up tasty foods. The truth is, there is no such thing as a diabetic diet, and people with diabetes can eat the same foods a person without diabetes eats.

Whether or not you have diabetes, a healthy diet starts with the same basic ingredients:

- Whole grains, beans, fresh fruits, and vegetables;
- Some low-fat dairy products;
- A few servings of lean meats or meat substitutes; and
- Modest amounts of well selected fats.

Your Registered Dietitian can help you figure out the number of servings of each of these foods to include in your daily meal plan. He or she can also help you figure out how many calories you should have to best manage your weight.

The Carbohydrate Balancing Act

Carbohydrates, proteins, and fats are the three major nutrients found in all food. Carbohydrates affect blood sugar levels the most. As a result, eating too many carbohydrates at once can make your blood sugar skyrocket. Meanwhile, not eating enough carbohydrates can make your blood sugar drop.

Carbohydrate-rich foods include sweets, fruits, and juices; as well as rice, pasta, cereals, breads, beans, starchy vegetables, milk, and yogurt. To keep blood sugar levels as close to normal as possible, you'll have to spread out your intake of these foods throughout the day. For many people that means eating 3 to 4 servings of carbohydrate-containing foods with each meal, and 1 to 2 servings of carbohydrate-containing foods with each snack.

Your Registered Dietitian (RD) or Certified Diabetic Educator (CDE) may explain how you can keep track of carbohydrates by counting the number of grams of carbohydrates in each of the foods you eat. This technique, called "carbohydrate counting" can help you manage your diabetes and keep your blood sugar levels closer to normal. You'll learn that each serving of carbohydrate-containing foods should have 15 grams of carbohydrate.

Carbohydrate counting comes in handy if you choose to indulge in dessert. Your meal plan will give you a total carbohydrate allowance for each meal and snack. If you decide to have a piece of cake with 30 grams of carbohydrates in it, you can, but you'll need to give up 30 grams of carbohydrates elsewhere in your meal.

Types of Carbohydrates and Nutrition Labels

As soon as you start counting carbohydrates, you will notice that food labels often list total carbohydrates, sugars, and dietary fiber. These are different types of carbohydrates. Most people with diabetes need only focus on the total carbohydrate count. Don't pay attention to terms like "net carbs" or "net utilizable carbs." These terms are not well defined, and they are often misleading.

Sugar-Free, Low-Carb, Low Sugar: Don't Believe the Hype

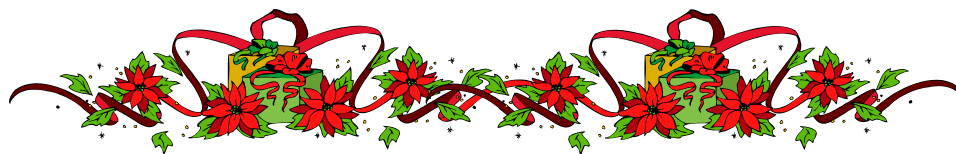
Some food manufacturers claim that their foods are sugar-free or low in sugar or carbohydrates. None of these claims actually means that the food has **NO** carbohydrates. Still, people sometimes mistakenly believe that they can eat as much of these foods as they like. That's why it's so important to check the label for the total grams of carbohydrate per serving.

Foods that are labeled "sugar-free" can still contain carbohydrates. Often these foods contain "sugar alcohols" such as Sorbitol, Mannitol, or Xylitol. These sugar alcohols taste sweet and contain fewer calories than sugar but contain no alcohol. Nevertheless, they do contain calories and they can raise blood sugar.

When it comes to food labeled "low in sugar" or "low in carbohydrates," the story gets even more complicated. There is no universal standard of "low" or "high." Therefore, food manufacturers can put "low-sugar" or "low-carb" claims on foods in just the same way as they might label them as "delicious." Would you believe a food was delicious just because it said so on the label?

A Health Coach Can Help

If you have diabetes and have questions about managing your diet, a Health Coach can help. Health Coaches are specially trained healthcare professionals, such as nurses, dietitians, and respiratory therapists. They are available by phone, anytime, 24 hours a day, 7 days a week, at no charge to you. To talk to a Health Coach, call [1-800-658-2750](tel:1-800-658-2750). You can also get information online at www.thedialogcenter.com/bcbsnd.



***Christmas is forever, not for just one day,
for loving, sharing, giving, are not to put away
like bells and lights and tinsel, in some box upon a shelf.
The good you do for others is good you do yourself.***

By Norman W. Brooks

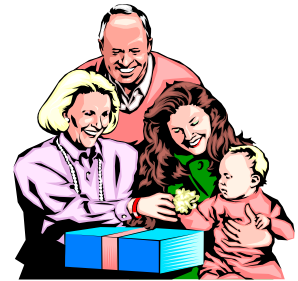
ND Family Caregiver Support Program

Grandparents as Caregivers

Grandparents raising grandchildren is a situation that is happening more and more frequently in the United States. Caring for the grandchildren can be temporary, permanent, part-time, or full-time.

There are many reasons why this situation occurs, ranging from a parent's need for help to parental failure. Some of the specific causes are:

- Serious illness or death of a parent
- Parent(s) away in the military or due to other occupations
- Drug and alcohol abuse in the home
- Child neglect and abuse
- Parent is mentally ill
- Parent is incarcerated
- Single parenthood or divorce
- Homelessness
- Unemployment
- Teenage pregnancy
- Abandonment of the child by the parent
- Parents working long hours
- Poverty



Grandparents come to the rescue in these situations to keep the child from foster home placement or to save them from further harm and despair and to keep them in the family.

Rewards and Challenges

Some grandparents face rearing their grandchildren with ambivalence or even resentment, while others take on their role with gratefulness and an opportunity to develop deeper relationships with their grandchildren. Personality types, values, financial security, housing, health, and available time all come into play as grandparents take on this responsibility. The degree of resentment or acceptance often is related to whether or not they had a choice in the matter.

Rewards: There can be much satisfaction for grandparents and grandchildren alike when they are working together toward maturity. Grandparents can give a sense of security after the pain of divorce or domestic violence, which eventually will help to foster self-respect, self-confidence, and self-identity in grandchildren. These accomplishments are often aided by the child's participation in religious activities, sports, school activities and academics.

Grandparents can preserve values that are important to their family and culture and relate family history to their grandchildren, giving a sense of belonging, worth, and stability. As grandchildren gain strength and grow, grandparents may experience a sense of renewal. Social contacts expand as grandparents work with the children in school, faith community or other activities. Grandparents may be exposed to new environments and experiences that enhance their own sense of fulfillment and positive development. Even though these events bring pleasure, it is natural for grandparents at times to resent the responsibilities and inconveniences involved in parenting again.

Challenges: Parents often think they are through with day-to-day parenting once their children are raised or nearly raised. They begin to make plans for the future without children at home. When these plans change, sometimes suddenly, great stress can occur for grandparents and grandchildren alike.

Children placed with grandparents need a warm and loving environment. They are often dealing with major losses, feelings of abandonment and fantasies about being reunited with their parents. They have much psychological work to do and may take out their anger on their grandparents (the custodial parent). Even though this is another stressor for grandparents and certainly something they did not seek, grandparents can use their wisdom and experiences to aid these children.

Grandparent caregivers face physical, emotional, financial, legal and educational challenges. Sometimes these stresses can be overwhelming and complicated. They can range from learning the new philosophies in infant care to dealing with a belligerent teenager or one with anorexia or drug addiction.

Taking Control – Care for the Grandparent

Suggestions for the Grandparents:

- Explore and take advantage of the many support services and systems that exist through organizations like AARP and Generations United.
- Join a local grandparent support group to learn from each other and advocate with government agencies, schools, insurance companies, and social agencies.
- Learn about your state's custody laws, determine what best meets your situation and pursue legal status.
- Once you obtain legal status, find out what rights and services are available.
- For mental well-being, develop flexibility in your roles as mentor, role model, playmate, parent, grandparent and nurturer.
- Try to maintain at least some of your former social contacts and activities.
- Make sure to maintain regular visits to your health practitioner.
- Follow good health practices of diet, rest and exercise.
- Arrange times for respite and getting away.
- Realize that the relationship grandparents have when they see their grandchildren periodically is different from the full-time relationship.
- Acknowledge and let yourself grieve the losses you are experiencing, such as freedom and lifestyle.

Conclusion

There are challenges and rewards for both the grandchildren and the grandparents who are raising them. Each experiences a roller coaster of emotions and feelings. However, both can gain power and strength through working with community agencies, social service organizations and faith communities that focus on the well-being of children and the needs of grandparents who are taking on parenting again. The needs of the children must be met, but there must also be care for the caregivers – the grandparents who have come to the rescue.

Source: The Caregiver Helpbook; Powerful Tools for Caregiving



The Center for Medicare and Medicaid (CMS) has awarded the Dept of Human Services a grant of \$8.9 million to help move 110 individuals from nursing homes (80) and Intermediate Care Facilities for Mentally Retarded (30) (ICF/MR) to community settings over the next five years. The intention is to increase the use of Home and Community Based Services (HCBS) to meet the Long Term Care needs of individuals that are elderly, have a physical disability, or a developmental disability.

To be eligible for the grant an individual must have lived in a nursing home or ICF/MR for six months or longer, be Medicaid eligible, and have expressed a desire to return to the community. Nursing home participants also must not have a severe impairment of their cognitive skills for decision making or have a diagnosis of Alzheimer's disease, and are not severely impaired in the activities of daily living related to bed mobility, transferring, locomotion, and toilet use, and who are not medically fragile.

The grant will fund the development and implementation of a demonstration case management process specifically designed to assist nursing home residents with the transition process to the community. The Nursing Facility Transition Coordination case management process will provide assistance and support prior to discharge and for one year following transition. Nursing home residents will be assisted with a transition to a residence owned or leased by the individual or their family member of the individual (apartment or house) or an Adult Foster Care.

The current Developmental Disabilities service system will be utilized to assist individuals from ICF/MRs with transitions to the community. ICF/MR residents will be assisted in moving to a home owned or leased by the individual or a family member, an apartment with an individual lease, or a community based residential setting in which no more than four unrelated individuals reside.

The supplemental demonstration services provided by the grant include payments for transition related expenses such as accessibility equipment and modifications, health and safety technology, apartment furnishings, security and utility deposits, home modifications, adaptive equipment and/or assistive technology, and one time vehicle modifications.

A stakeholder committee will be developed to educate consumers of the rebalancing efforts, identify activities and services lacking in communities, develop a plan of action to enhance services in underserved areas of the state, and monitor the implementation of the grant.

Over the next five months the stakeholder committee will be working with Dept of Human Services staff in the development of the grant operational protocol. Individual transitions will start in late spring of 2008 when this process is completed.

Jake Reuter is the Program Manager for grant implementation. He can be contacted by calling Medical Services at 701-328-2321 or by e-mail jwreuter@nd.gov with your concerns or questions.

Telephone Numbers to Know

Regional Aging Services Program Administrators

Region I:	Karen Quick	1-800-231-7724
Region II:	MariDon Sorum	1-888-470-6968
Region III:	Donna Olson	1-888-607-8610
Region IV:	Patricia Soli	1-888-256-6742
Region V:	Sandy Arends	1-888-342-4900
Region VI:	Russ Sunderland	1-800-260-1310
Region VII:	Cherry Schmidt (local: 328-8787)	1-888-328-2662
Region VIII:	Mark Jesser	1-888-227-7525

ND Family Caregiver Coordinators

Region I:	Karen Quick	1-800-231-7724
Region II:	Theresa Flagstad	1-888-470-6968
Region III:	Kim Helten	1-888-607-8610
Region IV:	Raeann Johnson	1-888-256-6742
Region V:	Laura Fischer	1-888-342-4900
Region VI:	CarrieThompson-Widmer	1-800-260-1310
Region VII:	LeAnne Thomas	1-888-328-2662
Region VIII:	Michelle Sletvold	1-888-227-7525

Long-Term Care Ombudsman Services

State Ombudsman:	Helen Funk	1-800-451-8693
Region I & II:	Michelle Jacob	1-888-470-6968
Region III & IV:	Kim Helten or Donna Olson (701-665-2200) OR	1-888-607-8610
Region V & VI:	Bryan Fredrickson	1-888-342-4900
Region VII:	Helen Funk	1-800-451-8693
Region VIII:	Mark Jesser	1-888-227-7525

Vulnerable Adult Protective Services

Region I & II:	MariDon Sorum	1-888-470-6968
Region III:	Ava Boknecht, Kim Helten, or Donna Olson	1-888-607-8610
Region IV:	Patricia Soli	1-888-256-6742
	Direct referral to GFCSS VAPS:	1-701-797-8540
	RaeAnn Johnson Vulnerable Adult Team (VAT):	1-888-256-6742
Region V:	Sandy Arends	1-888-342-4900
	Direct referral may be made to Cass County Adult Protective Services unit:	1-701-241-5747.
Region VI:	Russ Sunderland	1-701-253-6344
Region VII:	Cherry Schmidt or Sheila Lindgren,	1-888-328-2662 or 1-701-328-8888
Region VIII:	Mark Jesser	1-888-227-7525

Other

Aging Services Division and Senior Info Line:	1-800-451-8693
AARP: (1-888-OUR-AARP)	1-888-687-2277
ND Mental Health Association (Local):	1-701-255-3692
Help-Line:	1-800-472-2911
IPAT (Assistive Technology):	1-800-265-4728
Legal Services of North Dakota:	1-800-634-5263
or (age 60+):	1-866-621-9886
Attorney General's Office of Consumer Protection:	1-701-328-3404
	1-800-472-2600
Social Security Administration:	1-800-772-1213
Medicare:	1-800-633-4227
Senior Health Insurance Counseling (SHIC) ND Insurance Department:	1-701-328-2440
Prescription Connection:	1-888-575-6611
Alzheimer's Association:	1-701-258-4933
	1-800-232-0851

Russ Sunderland
Regional Aging Service Program Administrator
South Central Human Service Center
520 3rd Street NW
Jamestown, ND 58401

Phone: 1-701-253-6344
Toll Free: 1-800-260-1310
Fax: 1-701-253-6400

To:



Assistive Safety Devices Distribution Service

IPAT was once again awarded a contract through the ND Department of Human Services, Aging Services Division, to provide assistive safety devices and services. IPAT will fulfill this contract by operating the Assistive Safety Devices Distribution Service (ASDDS). This program has been established to help the state's residents who are at least 60 years old, not living in a nursing facility, continue to remain in their homes.

Participation in this program is voluntary and is at no cost to the participant. Devices that can be provided to promote safety include, but are not limited to: smoke alarms, automated medication dispensers with an alarm and lock, electric jar openers and uplift seat assists. For further information, contact Connie between the hours of 9:00 a.m.–5:00 p.m. CST by calling 1-866-673-6703 or 1-701-265-3165, or by faxing 1-701-265-3150, or e-mailing crawls@ndipat.org.